



Region IV Citizen Review Panel
707 N. Armstrong Pl, Boise, ID 83704
Huckleberry Room
Tuesday, September 7, 2021
4:00 pm – 6:00 pm

Meeting Minutes

Brian McCauley, Region IV Citizen Review Panel Chair called the meeting to order at 4:00pm

Panel Members: Nicole Noltensmeyer, Allison Berkson, Brian McCauley, Kym Nilsen, Shannon Peterson present. Britney Journee arrived at 4:11pm. Darcie Bobrowski absent.

Guests: Senator Melissa Wintrow.

Staff: Niki Flock, Chris Freeburne, Lance McCleeve (DHW) Courtney Boyce, Rob Howarth (CDH)

Motion: Brian made a motion to consent to the agenda as written. Shannon seconded. None opposed. The motion passes.

Motion: Brian made a motion to confirm August's meeting minutes as written. Shannon seconded. None opposed. The motion passes.

The Monthly Evaluation Form was provided in the Zoom chat box, as well as emailed out before the meeting.

DHW: Lance McCleeve & Chris Freeburne

Lance and Chris shared that they will be visiting all the CRPs and asking questions. They will use answers to identify themes and create an action plan, will see what works best and what is problematic for the functioning of the CRPs. After this meeting, it will be sent out to the Executive Committee so that the answers are accurate.

Notes provided by DHW on Listening Session

What is working well for your CRP?

1. The DHW liaison responds to questions, such as case details, policies, and culture. I feel supported when we can have productive conversations, even if we don't agree all the time. (Allison)
2. We're passionate about what we think and feel. I appreciate that disagreements aren't taken personally. (Nicole)

3. DHW leadership joins our meetings every quarter. They've been consistent at doing this. (Nicole)
4. DHW leadership joining our calls improves communication, accountability, and we're building relationships and teamwork. (Kym)
5. I completed a specific report on Valley County. The follow-up DHW did was commendable. I appreciate that they were listening and have seen the impact of their response. I hear it on the street, am seeing it in the community, and DHW reported back to us what they acted on when they came for a quarterly meeting. (Kym)
6. Love having e-cabinet; it's a great device and provides a lot of information. (Britany)

What are the current or prior commitments made by DHW that need a response?

1. We're waiting for a cover sheet in e-cabinet to be developed that would give us the ability to see the same data on every case. We know it's on the horizon but just a matter of timing. (Brian)
2. I am concerned about the lack of documents in e-cabinet. DHW is responsive to us; don't think it's easy to solve. (Brian)
3. I shared two specific cases at the last DHW leadership meeting. DHW was going to review those cases and get back to me but I haven't heard anything since. (Nicole)
4. We need to know when our responses are due for the annual report and when the annual report will be published. The last two annual reports have spanned different timeframes. (Courtney)
5. I asked about DHW workers having access to the CANS Assessments (Child and Adolescent Needs and Strengths) and learned they don't have access to them even though DHW, through Division of Behavioral Health, has the database. This brings about a larger concern that DHW workers are not reading/reviewing, perhaps not understanding the behavioral health needs of children on their caseloads. (Britany)
6. For Valley County, H&W representatives stated specifically that they would arrange for educational/informational opportunities that everyone could take part in (educators, psychologists, law enforcement, members of the court system, etc) that would establish a consistent foundation of knowledge from which to go forward in dealing with children and families in crisis. (Kym)
7. I would just reiterate that it would be helpful for our role to receive follow-up information on situations / patterns we see in cases. Oftentimes DHW indicates they will look into something but we never know what that means. I know we have to respect the confidentiality of all involved, but I am confident there is a way for DHW to let us know what is being done to resolve concerns without violating that. Our group truly cares about the outcome for children. We aren't here to fight DHW. We need to be partners and that requires trust and communication on both sides. (Darci)

What current concerns or feedback do you have regarding DHW's role and interaction with your CRP?

1. It's a struggle to find out what is the barrier with documentation. If I'm looking for a certain document, I need to find out if it wasn't produced, didn't get into the file, if it's not displaying properly, etc. It takes some prodding to get to the answer and it can be hard to find out who has the answer, so it gets lost in the shuffle; I slowly stop getting feedback. (Allison)
2. I often hear from fellow panel members that we're missing information and we need more transparency about documents going into e-cabinet. DHW does great work, I want them to get credit for it, but I don't see it in e-cabinet. As a therapist that works closely with DHW, I thought I would see my e-mails, treatment plans, CANS assessments, etc. in the file, but I have yet to see it in there. (Britany)

3. I like that they're at our meetings; we just need the follow-through when we bring up problematic issues. (Britany)
4. I feel DHW is doing well, have found them to be responsive. If we could do our job with e-cabinet, then it would be going much smoother. (Kym)
5. The ability to ask DHW questions (of DHW leadership) and share information has been facilitated – that's excellent. Systemically, most of the problems and outcomes for children continue to exist, which is disheartening. Lots of safety referrals are happening that are unsubstantiated, and children continue to linger in terrible situations. (Brian)
6. We have a continued conflict as to what the best interest of a child really means. (Brian)
7. Our job is to poke into all the corners. I feel like when we poke into corners where we find problems, the answer from DHW is to direct us to stay out of it. If there's a way to say no, DHW says no. (Brian)
8. Our job is to open up collaboration to find these problems and avoid legislation. The only way we can do that is to look at the terrible, ugly nature of things. We need to get all the way into those, ask all the questions, and point to how we can we fix it. A recent case is a great example of DHW being more concerned about maintaining status quo vs looking if we've done the best for a child. (Brian)
9. After all these years if this theme doesn't change, then nothing else really matters. We need to get away from checking the boxes and get more into the idea that we're here to look at cases to help kids. (Brian)
10. DHW must change the way it views our work, which by nature is uncomfortable, but we're supposed to find the stuff that doesn't work. Would love to see DHW say with open arms that this is great information. I don't like that it's not going well. Children are bearing the consequences; still seems that DHW is just pushing CRPs out of the way. (Brian)
11. Would love to see that when we identify a case that's weird, prolonged, etc., that we could know what DHW does to triage that case. Do they review the situation, ask why the child is still in care, etc.? We don't get to see the internal side of DHW as to what they did to review the case. (Shannon)
12. There's this confidentiality component, but we have to be able to talk about these things in order to discover and resolve them. I've spent more time this year fighting bureaucracy than looking at cases. No one is here asking how can we ruin people's careers. The problem is the feedback loop; information is shared, and we don't hear back. (Brian)
13. These are real children with names and examples. If what we're doing doesn't create change, then why are we doing this? (Kym)
14. I want to see the same shock and urgency from DHW that this situation matters to them. These are open cases and when they don't share what they're doing it does not communicate that they're working to find solutions to tough, agonizing situations. Would like to feel like the problems we're seeing matters to DHW. (Brian)
15. As a foster parent I always felt bad because DHW gets it from all sides; not a lot of people are happy with them. Completely empathize with the need to defend a lot of stuff, it's hard work. I feel like sometimes they defend themselves to anyone who has critiques for them. I do feel for the emotional energy it takes to weed out who they need to listen to. We should be part of that trusted team; we're part of the professional peers that are granted the confidential information. It might be a cultural thing; don't think it's unique to the CRP's. There are recommendations I'd love to bring up when DHW says they have transparency with foster parents. They do not, not at all, about very critical things. With social worker academy – they have a list of things you can't share with foster parents, such as HIV status, but there's not a list of things that says you have to share this, i.e., sexual abuse information for example. There's an imbalance of confidentiality and what you can't share, and not a lot of proactive steps to what you can share. (Allison)

Discussed what happens when a panel member has urgent concerns about an open case and what the process for communication is:

- I wonder how the current CRP law boundaries are. It denotes that the purpose is to make system recommendations for red flags, but if the law remains silent on what to say about an on-going case, why wouldn't we listen to those concerns if they may impact a child's safety? (Senator Wintrow)
- DHW has a process in which to receive these concerns; the role of the panels is not to make decisions or be involved in influencing the outcome of a court case. (Chris)
- Even if there is a process, DHW's stance is "you don't need to know." I made a phone call, was told it was all good, but no one is really digging into those concerns. It's reasonable to have some level of response with some kind of detail. (Brian)
- One of the recommendations I want to propose for the next quarterly report is due to a lack of a formal internal review aside from what data the feds want. There's not really anything on quality assurance, quality control. There's something informally, but no clear communication is getting back to us as we bring big red flags. DHW needs to build in a quality control process to look at cases, monitor what is supposed to be happening, and if not, who do we need to communicate with? (Allison)
- I like the idea of a full internal, independent case review. If DHW is evaluating its own efforts, sometimes it's hard to see outside the culture. Feels like there could be/should be a QA team that is comprised of internal and external people to review red flags. (Brian)
- I'm looking into building out our quality assurance, how we can put together internal and external people in the quality control processes. It's in the works, but we'll need to reach out to the CRP's for help on this. Do put it in your recommendations. (Lance)
- If there is a process for CRP's to follow when raising urgent concerns, does DHW have that written down, or could they write it down for our next leadership call? (Courtney)
- Will ask Roxanne to discuss this at the October meeting with the panel; will find out if it's written down. (Chris)

What can we do to respond to your current concerns and recommendations?

1. It seems like it would be helpful to have a "go to" person at DHW if you see some serious issues that you want to share...a quality assurance team is great, but what if there was a serious concern immediately? (Senator Wintrow)
2. There is concern that certain laws and policies not being followed; can we get a list of those immediate steps DHW, perhaps Cameron Gilliland, is taking in the next 90 days? I think it would really help to show that DHW is taking this seriously. (Senator Wintrow)
3. The case referenced last month had red flags. DHW was supposed to hold a meeting with the foster parent and that meeting has not happened. DHW misrepresentation themselves to the court, which is an ultra-red flag. This affected the child, and the foster parent still feels no one has responded to that. (Brian)
 - Note: Senator Wintrow put in the chat that she spoke to Cameron Gilliland and that he was addressing that.

How can we create a better operating and communication model between DHW and CRP's going forward?

1. DHW can provide timelines for reports and responses, that's easy. If DHW viewed us as a free investigative arm vs. adversarial meddlers, and really wanted to hear what we had to say, we would have better communication. (Brian)
2. Is there a point person that we should channel a concern to? It should not be considered closed until there is a response. Similar to a customer complaint; logged and not closed until it's resolved. (Shannon)
3. I think we need to create a problem-solving culture and how to address and get to the root of problems. Observed a culture of resistance, not the fault of DHW, but a culture of fear that prohibits and holds people back from being innovative and having a problem-solving mindset. Need to take a deep breath, be our best self, and look for solutions. How do we get to the root causes? Over time DHW gets beaten up. They need to get to a problem-solving mindset instead of being guarded. (Senator Wintrow)

Discussed timeline for the project and feedback about the results:

- Chris and Lance aiming for early December to have this finished.
- Chris and Lance will send a re-cap e-mail of our discussion; please review for any corrections/changes.
- There are some things that have come up today that warrant earlier feedback. Chris and Lance will discuss this and follow-up with the panel, such as:
 - Process for relaying immediate concerns to DHW; what is that process?
 - What short-list of items is DHW addressing now as a result of concerns raised by the panel, such as filing for termination of parental rights? Is DHW doing additional training, reviewing cases, etc.? Anything that can be shared could help re-establish trust.

CDH Discussion

This portion of the agenda was to discuss the roles and responsibilities of the public health district liaison as it meets the expectations of the Panel.

Brian shared his concerns with bureaucracy on an email that was sent to Brian and CDH leadership. This email addressed concerns regarding a potential, however unsubstantiated Open Meeting Law violation and the process of requesting case reviews as a Panel Member.

The Public Health District Liaison Role is able to address concerns regarding Open Meeting Law. The PHD Liaison Role will not address conflict of interest or other bylaw compliance, other than what is clearly laid out from the Panel regarding their role in the bylaws. The bylaws are written from the Panel for adherence by the Panel.

Role expectations:

The PHD district role will fulfill what has been legislatively mandated in [Idaho Code 16-1647](#).

"The public health districts shall develop an application and process for selecting citizen review panel members. The public health districts shall be responsible for convening the meetings of the citizen review panels and providing administrative support to coordinate meeting times and reports."

Bylaw compliance including conflict of interest is the responsibility of the Panel to address and manage. This does not include the MOU and NDA that DHW requires, as it is part of the onboarding of new panel members with record keeping by CDH. The PHD liaison will be of support to the Panel, only when

requested to address bylaw compliance, outside of the items that specially include the PHD as indicated in the bylaws.

The PHD liaison will assist in the onboarding of new Panel members. The PHD liaison will facilitate the yearly review of Open Meeting Law and Bylaws, in compliance with FY2021 bylaws, for the education and awareness of Panel members.

Panel attendance and length of terms for Panel members is the responsibility of the Secretary under the Bylaws 3.1.3. The PHD liaison can also track this information, however it is the responsibility of the Secretary to inform the Executive Committee when member attendance has exceeded two absences in a year (or whatever is laid out in the bylaws). When a Panel member's term is expiring or they have submitted a letter of resignation, the PHD liaison will inform the Executive Committee for them to address.

The PHD liaison will support the Panel in the writing and development of the quarterly report, from the recommendations that are provided by the Panel.

The Panel would like to include the ability to provide technical assistance including research within this role. Courtney asked how often the Panel would like to have research/technical assistance through this role. As of now it is utilized on a quarterly basis and by request. Courtney provided recent examples where research conducted by CDH was requested by the Panel but this is not a frequent need.

Courtney discussed that CDH's HPP will be taking on a new Administrative Assistant, and this conversation is to determine the Panel's expectations regarding the PHD role so that CDH can meet the needs of the Panel, within their staffing capabilities. If research needs are helpful to the Panel, it was requested for the Panel to assess that need so that public health expertise is actively utilized. Brian requested that if additional research may be of service to the Panel, either at the request of the PHD liaison or of the Panel, than the Panel would be informed and consent to the additional time and staffing towards technical assistance. Rob and Courtney discussed that Laura would have to determine what that looks like in terms of staffing, as it does not need to be mutually exclusive. Courtney also shared that CDH is exploring the equivalent of a grants manager role that will be working closely with HPP and FCS to identify and apply for grant opportunities within our divisions.

The PHD role is responsible for facilitating, collecting, and analyzing the Monthly Evaluation Form including number of case reviews, county-specific information, and in-kind hours. The PHD role will compile this information monthly and compile into the quarterly reports, and for the yearly report to the County Commissioners.

The Panel shared that they do not have a preference for their ongoing point of contact regarding if/and when outside contracts are requested.

CAPTA

This item will be moved to the next CRP meeting given time.

2020 National Citizens' Review Panel Conference

Nicole attended the Conference and summarized her takeaways. Nicole shared some of the ways that other states facilitate and conduct their CRPs is different than how Idaho is structured. The Panels have different functions, some review fatalities related to abuse, trauma provide recommendations, and another Panel is formed of just former foster youth. Nicole shared that they needed voices from former foster youth, former biological parents, and able to address child welfare fatalities or children engaged in abusive

situations, whether or not that record was known. Per Nicole at the Idaho CRP Leadership Conference call, there are no other CRPs functioning in Idaho, only PHD 4 and PHD 5.

Allison shared that one of the things she discovered with CAPTA, was that Idaho CPS only reports homicides, not other abuse/neglect related accident and suicides.

Adjourn

Brian McCauley adjourned the meeting at 6:14pm.